## P0800061091

(Re	equestor's Name)	
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Call Call

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Proteins Ur	nlimited Inc	
DOCUMENT NUM	ber: <u>P0800067</u>	091	
The enclosed Articles	of Amendment and fee a	re submitted for filing.	
Please return all corre	espondence concerning this	s matter to the following:	
		Barry Griffith	
	(Name o	f Contact Person)	
	<del></del>	roteins Unlimited Inc	
,			
	10 <b>22</b> 3	3 Arbor Side Drive (Address)	<u>., </u>
For further information		mpa, FL 33647 ate and Zip Code) please call:	<del></del>
Barry Griffith	·	at ( <u>813</u> ) <u>532-191</u>	7
·	Contact Person)	(Area Code & Daytime	•
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Add Amendment S Division of C P.O. Box 632 Tallahassee, F	Section orporations (1953) 7	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

			72 A
	ins Unlimited		
(Name of Corporation as cur	rently filed with	the Florida Dept. of	State)
. P0	8000067091		- 75°
	umber of Corporat	ion (if known)	32
tursuant to the provisions of section 607.10 ollowing amendment(s) to its Articles of Income		tes, this <i>Florida Pro</i>	fit Corporation adopts the
. If amending name, enter the new name	of the corporatio	<u>n:</u>	
Sriventure Inc			
he new name must be distinguishable incorporated" or the abbreviation "Corp., Co". A professional corporation na ssociation," or the abbreviation "P.A."	" "Inc.," or Co.	," or the designation	"Corp," "Inc," or
. Enter new principal office address, if ap Principal office address <u>MUST BE A STRE</u>			
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF			
If amending the registered agent and/or new registered agent and/or the new registered Agent:			enter the name of the
			<del></del>
New Registered Office Address:	(Flori	da street address)	
			. Florida
	<del></del>	(City)	(Zip Code)
ew Registered Agent's Signature, if chans hereby accept the appointment as register osition.			cept the obligations of th
	Signature of New	Registered Agent, if c	hanging

## If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	Name	Address	Type of Action
Vice Pre	Kim Griffith	10223 Arbor Side Drive	_ 🖸 Add
Vice Presi	dent	Tampa, Fl. 33647	Remove
			Add Remove
			<del>-</del> -
			_ 🖸 Add _ 🖸 Remove
	g or adding additional Articles, enter		
(attach addit	ional sheets, if necessary). (Be spec	ific) 	
		4	
provisions	idment provides for an exchange, re for implementing the amendment if applicable, indicate N/A)		
		<u>, , , , , , , , , , , , , , , , , , , </u>	
			·

The date of each amendmen	t(s) adoption: 4/5/08		•
Effective date if applicable:	4/5/08		
	(no more than 90 days after amendment file date)		•
Adoption of Amendment(s)	(CHECK ONE)		
	ere adopted by the shareholders. The number of votes cast for the ree sufficient for approval.	e amendme	nt(s)
	ere approved by the shareholders through voting groups. The folied for each voting group entitled to vote separately on the amend		ment
"The number of votes	cast for the amendment(s) was/were sufficient for approval		
by	."		
	(voting group)		
action was not required.  The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and	shareholder	
Dated_4/5/0	8		
Signature _	Byst		_
sel	y a director, president or other officer – if directors or officers have ceted, by an incorporator – if in the hands of a receiver, trustee, pointed fiduciary by that fiduciary)		
	Barry Griffith		, <u>, , , , , , , , , , , , , , , , , , </u>
	(Typed or printed name of person signing)		
	President		, ,
	(Title of person signing)		